0.2

Tuesday, June 03, 2014 9:24 AM

IQA 6/3/2014
Auditor: Dave Zirkelbach
Reviewed to standard

Des Moines Quality Management System
ISO9001:2008 Standard

QM 0.2 Introduction

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Quality Manual	0 – General	
Section 0.2	Section Revision: B	Revision Date: 5/2/2014
0.2 – Introduction		
Approved By: Todd Gifford		Date: 7/12/2010

DEE Electronics is a Distributor and Value-Added Integrator who performs Sales, Customer Service, Distribution, Manufacturing, Assembly, and other Value-Added functions with components and assemblies for its Original Equipment Manufacturer (OEM) Clients/Customers.

Dee Electronics developed and implemented a quality management system to demonstrate its ability to provide consistently, product that meets customer and applicable regulatory requirements, and to address customer satisfaction through the effective application of the system, including continual improvement and the prevention of nonconformity. Dee Electronics believes that determining, implementing of, and continued improvement of processes and systems (process approach) drives desired outcomes.

The quality system complies with the international standard ISO 9001:2008.

The manual is divided into four sections modeled on the sectional organization of the ISO 9001:2008 standard. Sections are further subdivided into several subsections representing main quality system elements or activities. Each subsection starts with a general policy statement expressing the commitment to implement the basic principles of the pertinent quality system element or activity. The general policy statement is followed by more specific procedural policies outlining how the general policy is implemented, and referencing applicable operational procedures.

The purpose of this manual is to define and describe the quality system, to define authorities and responsibilities of the management personnel involved in the operation of the system, and to provide general procedures for all activities comprising the quality system.

Another purpose of this manual is to present the quality system to our customers and other external interested parties, and to inform them what specific controls are implemented at Dee Electronics, Inc. to assure quality.

President:

Todd Gifford

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Tuesday, June 03, 2014 9:25 AM

IQA 6/3/2014
Auditor: Dave Zirkelbach
Verified .3 quality manual to the standard and conforms

Des Moines Quality Management System
ISO9001:2008 Standard

QM 0.3 – Exclusions

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Quality Manual	0 – General	
Section 0.3	Section Revision: A	Revision Date: 7/12/2010
0.3 – Exclusions		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

The quality management system shall be relevant to the nature of our organization and products, and to customer and regulatory requirements. For this reason, those requirements of ISO 9001:2008 that do not apply are excluded from the scope of our quality system.

PROCEDURAL POLICIES

The following rules and criteria are used for excluding irrelevant requirements:

1. An ISO 9001:2008 requirement may be excluded only when both of the following conditions are met:

a) The requirement must be within ISO 9001 Clause 7, Product Realization; and

b) The exclusion may not affect our ability, nor absolve us from the responsibility, to provide product that meets customer and applicable regulatory requirements.

2. The President is responsible for identifying those requirements of ISO 9001 that do not apply to our organization or products, and to propose exclusions of such requirements from the scope of the quality system.

3. Top executive management has the responsibility and authority for evaluating whether the proposed exclusions are appropriate, and for approving them. Evaluation and approval of exclusions are conducted within the framework of management reviews of the quality system (refer to Operational Procedure QOP-56-01, Management Review).

4. Any exclusions taken are documented in this section of the quality manual. The excluded requirements are precisely identified with reference to specific clauses and/or statements in the standard. There is also a brief justification why the exclusion is taken and why it is appropriate.

EXCLUSIONS

1. **Exclusion:** ISO 9001:2008 Section 7.3, Design and/or Development, including all subsections

Justification: Dee Electronics, Inc. does not design or develop products. All principal product characteristics are specified by the customers or their consultants. Dee Electronics is a Distributor and Contract Manufacturer which buys, assembles, and resells products designed by other companies.

2. **Exclusion**: ISO 9001:2008 Section 7.5.2, Validation of Processes, including all subsections

Justification: Dee Electronics, Inc. does not require Validation of Processes because we have no Special Processes.

0.4

Tuesday, June 03, 2014 9:25 AM

IQA 6/3/2014
Auditor: Dave Zirkelbach
Checked PJR website and made sure had the most up to date copy on the quality manual

Des Moines Quality Management System
ISO9001:2008 Standard

QM 0.4 – Registration Mark/Logo

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Quality Manual	0 – General	
Section 0.4	Section Revision: A	Revision Date: 7/12/2010
0.4 – Registration Mark/Logo		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

The quality system described in this Quality Manual conforms to the requirements of the standard: PJR Pro 3 Registration Mark Procedure.

The Responsibility and Authority for carrying out quality system activities related to this element have been assigned to the President. All associates have the responsibility to carry out their work assignments in accordance with the quality policy and quality system documentation. The associates have been granted appropriate authority to complete the activities assigned in order to meet specified requirements.

PROCEDURAL POLICIES

1. Dee Electronics identifies uses for Registration and Accreditation marks on various materials.
2. The PJI Pro 3 Registration Mark Procedure is consulted and reviewed.
3. The President ensures that Registration and Accreditation marks are used in accordance with the PJI Pro 3 Registration Mark Procedure.

ASSOCIATED DOCUMENTS

PJR Registration Mark Pro 3 Procedure

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0.5

Tuesday, June 03, 2014 9:55 AM

IQA 6/3/2014
Auditor: Dave Zirkelbach
Stage 1 audit concern area was that DM sequence of processes document did not have flow char steps defined by process. This has been done and updated and now conforms.

Des Moines Quality Management System

ISO9001:2008 Standard

QM 0.5 – Description of Sequence and Interaction of Processes

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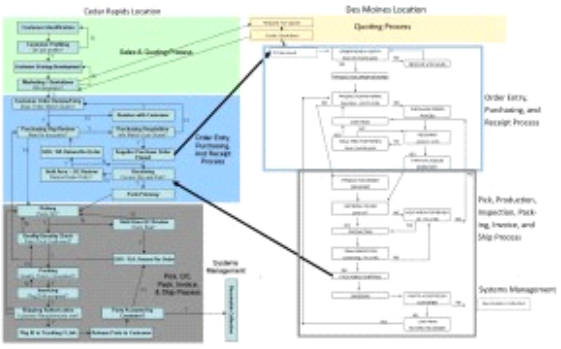
Quality Manual	0 – General	
Section 0.5	Section Revision: B	Revision Date: 5/20/2014
0.5 – Description of Sequence and Interaction of Processes		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL

This section provides and overview description of sequence and interaction of processes at Dee Electronics.



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Tuesday, June 03, 2014 9:12 AM

IQA 6/3/2014
Auditor: Dave Zirkelbach
Reviewed 4.1 to the standard

Des Moines Quality Management System
ISO9001:2008 Standard

QM 4.1 – General Requirements

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Quality Manual	4 – Quality Management System	
Section 4.1	Section Revision: A	Revision Date: 7/12/2010
4.1 – General Requirements		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

The quality system described in this section of the Quality Manual conforms to the requirements of the standard: Element 4.1 General Requirements.

Dee Electronics Inc. is committed to determine, establish, document, implement and maintain a quality management system, and continually improve its effectiveness, in conformance with requirements of ISO9001:2008 International Standard.

PROCEDURAL POLICIES

1. Quality system processes

1.1 Processes needed for the quality management system are determined in this quality manual and in associated operational procedures and work instructions. The documentation defines these quality system processes and their sequence and interaction, and instructs on how to implement and apply them throughout the organization.

1.2 Quality system documentation also defines criteria and methods needed to ensure that the operation and control of quality system processes are effective. This usually includes assignment of responsibilities and allocation of resources for the process, instructions on how to carry out (or operate) the process, and definition of methods for monitoring and/or measuring the effectiveness of the process.

1.3 Operational Procedure QOP-42-01, Quality System Documentation, explains in more detail how quality system processes are defined and documented.

2. Resources and information

2.1 President is responsible for determining resource and information requirements necessary to support the operation and monitoring of quality system processes, and for communicating these requirements to the top management. The top executive management is responsible for ensuring the availability of necessary resources and information. Section 6.1 of this quality manual, Provision of Resources, explains in more detail how resource requirements are identified and satisfied.

Confirmed with President this happens

3. Monitoring and measurement

3.1 The performance of quality system processes is systematically monitored and/or measured (where applicable). This is to ensure their effectiveness and identify opportunities for improvement.

3.2 The performance of product realization processes is usually monitored by measuring process parameters and/or product characteristics resulting from the process; and through the program of inspections and tests applied to the product. The performance of processes required for quality management is usually monitored through internal quality audits. The overall performance of the quality system is monitored by measuring customer satisfaction.

3.3 Monitoring and measuring activities are defined in Sections 8.1 and 8.2 of this quality manual, and in the corresponding operational procedures.

4. Conformance and continual improvement

4.1 Quality management system processes are regularly reviewed by the top management to identify any possible failures or breakdowns, as well as opportunities for improvement. Actions necessary to address actual or potential problems and to improve the quality system are implemented through corrective and preventive actions and management improvement projects. Sections 5.6 and 8.5 of this quality manual and the corresponding operational procedures define how management reviews and corrective/preventive actions are used to ensure conformance and improvement.

Mgmt Review meetings, corrective action process

5. Outsourced processes

5.1 When processes that affect product conformity are outsourced (performed by an external party), special controls are implemented to ensure that these processes meet specified requirements. Such controls may include, as appropriate: evaluation and pre-qualification of suppliers; assessment of supplier realization processes and quality system; monitoring of supplier quality performance; requirements for inspection, testing or other records demonstrating product conformity; or containment and verification of the supplied product. Section 7.4 of this quality manual and the corresponding operational procedures define such purchasing control system.

ASSOCIATED DOCUMENTS

Quality Manual: All sections

Operational Procedure QOP-42-01: Quality System Documentation

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Tuesday, June 03, 2014 9:26 AM

IQA 6/3/2014
Auditor: Dave Zirkelbach
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Des Moines Quality Management System
ISO9001:2008 Standard

QM 4.2 – Documentation and Records

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Quality Manual	4 – Quality Management System	
Section 4.2	Section Revision: A	Revision Date: 7/12/2010
4.2 – Documentation and Records		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

The quality system described in this section of the Quality Manual conforms to the requirements of the standard: Element 4.2 Documentation Requirements.

Scope of the quality system documentation is defined. Establishment and revision of documents, and their distribution, are controlled. New documents and revisions are reviewed and approved prior to issue; and are identified with respect to their revision level. Appropriate documents are available at locations where they are used. Obsolete documents are removed from points of use. Documents of external origin are identified and their distribution is controlled.

Quality records are identified and indexed to facilitate their retrieval, and are stored in a suitable environment to minimize deterioration. Quality records are retained for a period of time at least equivalent to the lifetime of the product.

PROCEDURAL POLICIES

1. Scope

1.1 Dee Electronics, Inc. quality system documentation comprises the following types of documents and records:

> *Quality manual (including a documented quality policy); Documented statements of quality objectives; Operational procedures; Work instructions; Product*

realization and control plans.

Saw evidence of all the above

The documentation structure that is used in this quality system consists of four tiers:

- The first tier of the quality system documentation structure is the quality manual (including documented Quality Policy), which covers all requirements of the standard, makes reference to quality system procedures, outlines the documentation structure and illustrates Dee Electronics' positive commitment to fulfill these requirements.
- The second tier consists of documented procedures, which are specified methods for managing activities. These procedures are consistent with the requirements of the standard and DEE's quality policy, and are to be implemented effectively.
- The third tier is work instructions, which are highly specific ways to perform activities.
- The fourth tier consists of records, forms, tags and other documentation.

A single document may include the requirements for one or more procedures. A requirement for a documented procedure may be covered by more than one document.

Purpose, scope, and responsibility for controlling various types of documents are defined in Operational Procedure QOP-42-01, Quality System Documentation.

2. Quality Manual

2.1 The top level document defining the overall quality management system is the Quality Manual. It includes:

The scope of the quality system, including details of and justification for any exclusions (refer to Section 0.3);

Description of quality system processes, their sequence, and interrelation; and

References to documented procedures.

3. Document control

3.1 Dee Electronics has established and maintains documented procedures to control all documents and data that relate to requirements of the ISO 9001:2008 standard, including, to the extent applicable, documents of external origin (those determined by the organization to be necessary for the planning and operation of the quality management system).

3.2 Document and Data Approval and Issue – The documents and data are reviewed and approved for adequacy by authorized personnel prior to use. An electronic document control procedure identifying the current revision status of documents is readily available to prevent the use of invalid and/or obsolete documents.

3.3 The authorized functions and the rules governing the issue of documents are defined in procedures QOP-42-01, Quality System Documentation, and QOP-42-02, Control of Documents. All documents are reviewed and approved prior to issue.

3.4 The pertinent issues of appropriate documents are available electronically at all locations where operations essential to the effective functioning of the quality system are performed. Invalid and/or obsolete documents are promptly removed from electronic access, or otherwise assured against unintended use. Any obsolete documents retained for legal and/or knowledge purposes are suitably identified.

3.5 Changes to documents and data are reviewed and approved by the same functions that performed the original review and approval, unless specifically designated otherwise. The designated functions or organizations have access to pertinent background information upon which to base their review and approval. Where practicable, the nature of the change is identified in the document or the appropriate attachments.

4. Control of quality records

4.1 Dee Electronics has established and maintains documented procedures to define the controls needed for the identification, storage, protection, retrieval, retention and disposition of records. Records maintained are legible, identifiable, and retrievable.

4.2 Quality records are established and maintained to provide evidence that: There has been conformance to specified requirements, and the quality system is operated in accordance with documented procedures and that it is effective.

4.3. All quality records are legible, and are stored and retained in such a way that they are readily retrievable in facilities that provide a suitable environment to prevent damage or deterioration and to prevent loss. Retention times of quality records have been established and recorded. Where agreed contractually, quality records are made available for evaluation by the customer or the customer's representative for an agreed period.

ASSOCIATED DOCUMENTS

Operational Procedure QOP-42-01: Quality System Documentation

Operational Procedure QOP-42-02: Control of Documents

Operational Procedure QOP-42-03: Control of Quality Records

From <http://desmoines.deei.com/?page_id=61>

4.2.1

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QOP-42-01 – Quality System Documentation

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QMS Operational Procedure	QOP-42-01	
Section 4.2	Section Revision: A	Revision Date: 7/12/2010
Quality System Documentation		
Approved By: Todd Gifford		Date: 7/12/2010

PURPOSE

The purpose of this procedure is to:

a) Identify documents defining the quality management system, production processes, and products: and

b) Assign responsibilities for establishing and maintaining the documentation.

APPLICATION

Scope: This process pertains to all documents utilized in the Dee Electronics quality system.

PROCEDURE

1. General

1.1 The scope and extent of quality system documentation is determined on the basis of the complexity and interaction of processes, elements, and activities; and on competence of personnel. The documentation is sufficient to ensure the effective planning, operation and control of the quality system, processes, and products.

2. Quality manual

2.1 The purpose of the quality manual is to:

> *State the company's principal quality policy as well as specific policies related to particular elements of the quality system;*

State the company's principal quality policy as well as specific policies related to particular elements of the quality system;

Define and describe quality system processes, their sequence, and interrelation;

Define responsibility and authority of management personnel involved in the operation of the quality system; and

Outline general procedures for various activities comprising the quality system, and reference applicable Operational Procedures.

2.2 The President formulates the principal quality policy and approves the quality manual. The President is responsible for maintaining the manual. The quality manual is authorized by the President.

Confirmed with president

3. Operational procedures

3.1 The purpose of operational procedures is to define systems, assign responsibilities and authorities, and provide instructions for carrying out activities comprising the quality system. Operational procedures explain the what, when, who and how for each activity; identify interfaces for the activity; and instruct who should be informed and how the results of the activity should be recorded.

3.2 Operational procedures are code numbered QOP-SS-NN. QOP stands for *Quality Operational Procedure*, SS is the section in the quality manual to which the procedure pertains, and NN is the consecutive number of a procedure for the section.

Verified with random checks this is in place

4. Work instructions

4.1 The purpose of work instructions is to guide personnel in performing specific tasks, such as carrying out and controlling processes (process operator instructions), handling products, conducting tests or inspections, and so forth.

4.2 Work instructions are documented electronically, generally, on the forms in which the personnel performing the task are using.

5. Customer engineering documents

5.1 This category includes customer drawings, specifications and other documents defining the customer's requirements. These can be product documentation, testing procedures, acceptance criteria, and so forth.

5.2 Customer's documents are not used directly in our processes. They are re-interpreted and re-issued as Dee Electronics's own documents/work instructions/records.

5.2 Customer's documents are not used directly in our processes. They are re-interpreted and re-issued as Dee Electronics's own documents/work instructions/records.

6. Product realization and control plans

6.1 Documents under this category are the output of product realization and verification planning, as defined in Section 7.1 of the quality manual.

6.2 The purpose of product realization plans is to sequence, coordinate, and schedule operations; and reference electronic forms used. Process flowcharts and electronic order input forms are examples of documents defining plans.

6.3 Control plans identify process control scope and methods, define the inspection/testing points and methods, and reference specific process control and inspection instructions, and acceptance criteria.

6.4 These types of documents are usually issued by the President or Quality Assurance.

Finding - This procedure needs to be changed to facility ops manager along with quality assurance. Corrective action to change procedure

ASSOCIATED DOCUMENTS

Operational Procedure QOP-42-02: Control of Documents

From <http://desmoines.deei.com/?page_id=63>

4.2.2

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ISO9001:2008 Standard

QOP-42-02 – Control of Documents

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QMS Operational Procedure	QOP-42-02	
Section 4.2	Section Revision: A	Revision Date: 7/12/2010
Control of Documents		
Approved By: Todd Gifford		Date: 7/12/2010

General

Purpose:The intent of this procedure is to describe the process at Dee Electronics for Document and Data Control, Section 4.2.3 of ISO 9001:2008.

Scope: This process pertains to all documents utilized in the Dee Electronics quality system.

Definitions

1. QM- Quality Manual.
2. QOP- Quality Operations Procedure.
3. QF- Quality Form.

Responsibilities

1. The overall R&A for activities relating to this element of the standard have been assigned to the President and the MR. Team Members are charged with the responsibility to implement the procedure as written, and have been granted appropriate freedom and authority to do so.

Procedure

1. Dee Electronics makes every effort to create a paperless environment for quality documentation. Controls are in place to ensure accessibility and security.
2. The quality system documentation at Dee Electronics consists of four levels, as described in QM 4.2 of the Quality Manual.
3. Level I through Level IV documentation, and a corresponding Master List, is located on our Intranet website on our Network, and is accessible by all employees.
4. Documentation on the Intranet website is maintained in a read-only format. Only the President is permitted to alter the format or content of our Quality System documentation. **Finding-change to president and quality manager can make changes**
5. Requests for changes to quality documents are submitted to the MR or

Only the President is permitted to alter the format or content of our Quality System documentation. **Finding-change to president and quality manager can make changes**

5. Requests for changes to quality documents are submitted to the MR or President by way of an electronic Document Change Request, Form QF-42-02-01, identifying the originator of the change, the approval of the change by the original approval authority, and background information explaining the reason(s) for the change. The Document Change Request is associated electronically with the revised document so that the change history is always available. **Finding-add quality manager**
6. Quality document change requests are reviewed and approved by the the President, verbally or via electronic mail for entry into controlled documents. **Finding - add quality manager**
7. Quality Manual and Procedure last changes will be highlighted in bold type.
8. Dee Electronics conforms to the PRO-3 Registration Mark Procedure concerning the use of the Registration Mark and the Accreditation Marks.
9. Dee Electronics can control external documents if it has need to do so.

Related Documentation

QF-42-02-01 Quality Form: Document Change Request Form

QOP-42-01 Operational Procedure

From <http://desmoines.deei.com/?page_id=68>

4.2.3

Tuesday, June 03, 2014 9:28 AM

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ISO9001:2008 Standard

QOP-42-03 – Control of Records

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QMS Operational Procedure	QOP-42-03	
Section 4.2	Section Revision: A	Revision Date: 7/12/2010
Control of Records		
Approved By: Todd Gifford		Date: 7/12/2010

General

Purpose: The intent of this procedure is to describe the process at Dee Electronics for the

Control of Quality Records, Section 4.24 of ISO 9001:2008.

1.2 Scope: This procedure pertains to all company and vendor-related quality records that are utilized in the Dee Electronics quality system documentation plan and are required by ISO 9001:2008.

Definitions: none

Responsibilities

The overall R&A for this element of the standard have been assigned to the President and the MR. Team Members are charged with the responsibility to implement the procedure as written, and have been granted appropriate freedom and authority to do so. **Finding - add quality manager**

Procedure

1. As Retention R&A for specific categories of quality records, the President and the MR ensure that identified electronic quality records are retained and stored using methods that guarantee their preservation, legibility and accessibility to authorized persons. **Finding - add quality manager**
2. The President or MR makes hard copy quality records available to customers when contractually agreed. **Finding - add quality manager**

3. The President maintains, revises, and safeguards required electronic quality records, including off-site storage of backed-up records. Backups are done nightly, which is a snapshot of every virtual server. 10 restore points (10 days worth of backup) is kept on the server. A monthly backup is created the first Saturday of every month to an external hard drive. This hard drive is stored in a fire proof safe when not full in the IT Director's office, and when it is full, it is given to the President to be retained in his home. **Finding - add quality manager**

Associated Documents

QF-42-01 Quality Form – Quality Records List / Retention Matrix

QOP-42-01 Operational Procedure – Quality System Documentation

QOP-42-02 Operational Procedure – Control of Documents

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ISO9001:2008 Standard

QM 5.1 – Management Commitment

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Quality Manual	5 – Management Responsibility	
Section 5.1	Section Revision: B	Revision Date: 6/15/2012
5.1 – Management Commitment		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

The executive management is ultimately responsible for establishing, implementing, maintaining, and improving the quality system. Management commitment is demonstrated by communicating to the organization the importance of meeting requirements, establishing the quality policy and quality objectives, conducting management reviews of the quality system, and ensuring the availability of necessary resources.

PROCEDURAL POLICIES

1. Top management

1.1 For the purpose of administrating the quality management system, executive management includes the **President, CEO/Treasurer, Vice President-Sales, and Vice President-Operations**, defined in this manual in Section 5.5, Organization and Communication. - **Finding - add quality manager**

2. Customer requirements

2.1 Executive management is committed to communicate the importance of meeting customer as well as regulatory and legal requirements. The

Management representative is responsible for implementing this commitment by promoting awareness of customer requirements throughout the organization. This responsibility of management representative is stipulated in Section 5.5, Organization and Communication.

3. Quality policy and quality objectives

3.1 Executive management defines the purpose and objectives for the quality management system. They are documented and communicated in the form of quality policy and quality objectives. Processes for establishing the quality policy and quality objectives are defined in this manual in Section 5.3, Quality Policy, and Section 5.4, Quality System Planning.

4. Management reviews

4.1 Executive management periodically reviews the quality management system to ensure its continuing suitability, adequacy, and effectiveness. The review evaluates current status and performance of the quality system and initiates actions for further improvement of the system. The process for conducting management reviews is defined in Section 5.6 of this manual and in Operational Procedure QOP-56-01, Management Review.

5. Resources

5.1 Top management is committed to providing resources necessary for establishing, implementing, and improving the quality management system. Section 6.1 of this manual defines processes for identifying resource requirements and allocation of resources for specific activities and projects.
Finding - add quality manager to organizational chart

ASSOCIATED DOCUMENTS

QOP-56-01 Operational Procedure: Management Review

From <http://desmoines.deei.com/?page_id=72>

5.2

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QM 5.2 – Customer Focus

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Quality Manual	5 – Management Responsibility	
Section 5.2	Section Revision: A	Revision Date: 7/12/2010
5.2 – Customer Focus		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

The principal objective of the quality management system is to focus our organization on the customer, and in particular, on customer satisfaction. The key to achieving high customer satisfaction is a good understanding of customer requirements and a capability to consistently fulfill these requirements.

PROCEDURAL POLICIES

1. Determining customer requirements

1.1 Customer requirements are understood broadly to include all aspects of product requirements and associated services, that are relevant to customer satisfaction. When appropriate, this may also include customer needs and expectations. Specialized ongoing Customer requirements and attributes are also understood and documented.

1.2 Customer order requirements are determined and verified through the process of order review. This process is defined in this manual in Section 7.2, Customer-related Processes, and in operational procedures QOP-72-01 Order Processing.

2. Meeting customer requirements

2.1 Nearly all processes and elements of the quality system are designed and implemented specifically to ensure that customer requirements are met. This starts with provision of required training, and adequate infrastructure and suitable work

environment (Section 6, Resource Management). Next follows planning and implementation of reliable and effective product realization processes (Section 7, Product Realization). And finally, activities related to product and process monitoring and verification (Section 8, Measurement, Analysis and Improvement).

2.2 Meeting of customer requirements is monitored and/or verified by variety of methods defined in Section 8.2, Monitoring and Measurement, and in associated operational procedures. Results of these verification activities are recorded to provide evidence of product conformity, as defined in Section 4.2, Documentation and Records.

3. Customer satisfaction

3.1 Focusing on customer requirements and on meeting these requirements should result in enhancing customer satisfaction. In fact, the level of customer satisfaction is used as a measure of the effectiveness of the whole quality system.

3.2 Specific methods for determining customer satisfaction are defined in quality manual Section 8.2 and in the associated operational procedure QOP-82-01, Customer Satisfaction. This valuable information is reported and used as described in Section 5.6, Management Review.

ASSOCIATED DOCUMENTS

QOP-72-01 Operational Procedure: Order Processing

QOP-72-02 Operational Procedure: Customer Feedback and Complaints

QOP-82-01 Operational Procedure: Customer Satisfaction

QOP-56-01 Operational Procedure: Management Review

From <http://desmoines.deei.com/?page_id=74>

5.4

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Auditor: Dave Zirkelbach
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Des Moines Quality Management System
ISO9001:2008 Standard

QM 5.4 – Quality Planning

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Quality Manual	5 – Management Responsibility	
Section 5.4	Section Revision: A	Revision Date: 7/12/2010
5.4 – Quality Planning		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

Quality objectives are established to support and implement the quality policy and continual improvement. Quality planning includes identification and determination of quality system processes (including any exclusions of ISO 9001 requirements); priorities for continual improvement; and resources needed to achieve quality objectives and to maintain and improve the quality system. Quality plans are periodically reviewed and updated to maintain the integrity of the quality system during organizational and other changes.

PROCEDURAL POLICIES

1. Quality objectives

1.1 Quality objectives are established throughout the organization to implement the quality policy, to meet requirements for products and processes, and to improve quality system and quality performance.

1.2 Quality objectives define the direction and priorities for continual improvement. Use of quality objectives for facilitating continual improvement is explained in Operational Procedure QOP-85-01, Continual Improvement.

1.3 Quality objectives are classified into the following four categories:

Policy objectives:

These are principal, strategic objectives that apply to the whole organization (Continuous Improvement Objectives). They are typically included in the Quality Policy itself, or may be communicated in memoranda from the top management. Policy objectives are authorized by the President.

Quality performance objectives:

These objectives set specific, measurable targets for improving operational performance to ensure customer satisfaction (examples are: improvement of on-time delivery performance, improvement in delivery of un-damaged product, etc…). They apply to departments and functions having direct responsibility for activities that require improvement. Performance objectives are established, documented, and monitored within the framework of management reviews of the quality system, in accordance with Operational Procedures QOP-56-01, Management Review.

Service quality objectives:

. These objectives pertain to improvement of services (examples are improved packaging techniques, improvement in Packing Slips, improvement customer alerts, etc…). Service objectives are established by the President and top executive managers responsible for marketing and product/service development. They can be documented in product briefs, memoranda, or minutes of meetings; and apply to functions responsible for development of services.

Quality system objectives:

These objectives pertain to improvement of quality system processes and performance (examples are: Customer Recognition Awards, expansion of ISO9000 Certification to other facilities, etc…). Quality system objectives are established, documented, and monitored within the framework of management reviews of the quality system, in accordance with Operational Procedure QOP-56-01, Management Review.

2. Quality system planning

2.1 Quality system elements and processes are planned to ensure that the system is appropriate for its intended purpose, and that it is effective and efficient. The purpose of the quality system is:

To achieve the quality policy;

To ensure and demonstrate our ability to provide consistently product and services that meets customer and regulatory requirements;

To ensure high level of customer satisfaction;

To ensure high level of customer satisfaction;

To facilitate continual improvement; and

To comply with requirements of ISO 9001 standard.

2.2 The output of quality system planning is documented in this quality manual, in associated operational procedures, and in other referenced documents. These documents identify and define all elements and processes of the quality system.

2.3 Changes to the quality system are planned within the framework of management reviews (refer to Operational Procedure QOP-56-01, Management Review). These changes may be in response to changing circumstances, such as product, process, capacity, or other operational or organizational change; or to improve the effectiveness and efficiency of the quality system.

3. Product realization and verification planning

3.1 Planning of product realization, verification, and validation processes is addressed in Section 7.1 of this manual.

4. Continual improvement planning

4.1 Improvements of the quality system are planned within the framework of management reviews. The output of this planning is expressed in the form of quality system objectives, as defined above in Clause 1.3 of this section, and in Operational Procedures QOP-85-01, Continual Improvement; and QOP-56-01, Management Review.

ASSOCIATED DOCUMENTS

QOP-56-01 Operational Procedure: Management Review

QOP-85-01 Operational Procedure: Continual Improvement

From <http://desmoines.deei.com/?page_id=80>

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Des Moines Quality Management System
ISO9001:2008 Standard

QM 5.5 – Organization and Communication

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Quality Manual	5 – Management Responsibility	
Section 5.5	Section Revision: A	Revision Date: 7/12/2010
5.5 – Organization and Communication		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

Functions and their interrelation within the company are defined and communicated.

Executive management appoints a management representative of the Dee Electronics organization responsible for establishment and maintenance of the quality system, and for reporting to the executive management on the performance of the system.

Issues regarding the quality system are communicated internally though distribution of pertinent documents, meetings, training and awareness programs, and management reviews.

PROCEDURAL POLICIES

The Responsibility and Authority for overall administration of Dee Electronics quality activities are shared by the Executive Management: the President and the CEO/Treasurer.. The associates of Dee Electronics have the responsibility to carry out all quality activities in support of its quality policy, quality system documentation and customer requirements. Each associate has been granted appropriate authority in order to meet specified requirements.

Departments, groups and functions within the company, and their interrelations, are defined in the Dee Electronics Quality Manual, Quality Operations Procedures, and Organizational Chart.

MANAGEMENT RESPONSIBILITY

1. Quality Policy – A company quality policy has been established by executive management identifying quality system goals, objectives and commitment to customer expectations. This policy has been communicated to all employees and is maintained as the highest priority within the company. Each associate understands his or her role.

2. Responsibility and Authority – The responsibility, authority and interrelation of personnel who manage, perform and verify work affecting quality has been defined and documented, particularly for personnel who need the organizational freedom and authority to:

- Initiate action to prevent nonconformities relating to product, process and quality system,
- Identify and record any problems relating to the product, process and quality system,
- Initiate, recommend or provide solutions through designated channels,
- Verify the implementation of solutions,
- Control further processing or delivery of nonconforming product until the deficiency or unsatisfactory condition has been corrected.

3. Resources – Resources required to complete quality system activities are identified during management review and adequate resources are provided, including assignment of trained personnel for management, performance of work and verification activities, including internal quality audits.

1. Training will ensure the availability of qualified people to perform management, distribution and verification activities.
2. Team Members with input to the adequacy of resources are invited to submit their suggestions and/or concerns to executive management by way of the Employee Concern Form posted on the Internet Site.

4. Management Representative – The President has been appointed MR by the QSC and executive management. The MR has been granted full authority for establishing, implementing, maintaining and reporting on quality assurance system activities. The MR is also responsible for promoting awareness of customer requirements throughout the organization.

5. Management Review – The MR carries out scheduled Management Review meetings with executive management at defined intervals. These reviews determine the effectiveness and suitability of the implemented quality system requirements. Minutes of these review meetings are maintained as records.

INTERNAL COMMUNICATION

Internal communication regarding the quality system flows two ways:

1. The management communicates to the organization the quality policy and objectives; customer and regulatory requirements; product and process specifications; verification and validation requirements; and instructions on how to implement and use the quality system.

2. The organization communicates to the management information and data regarding customer needs and expectations, customer satisfaction, quality performance, the

effectiveness of the quality system, and opportunities for improvement.

The information is communicated through manuals, procedures, instructions, quality records, reports, etc.; and through training, on-the-job instruction, and meetings. Operational Procedures QOP-42-01, Quality System Documentation; QOP-42-02, Control of Documents; and QOP-62-01, Training and Awareness, regulate these activities.

5. Management review meetings have a special role in ensuring proper communication between the top management and the organization. The meeting provides the framework for the organization to report on the status of quality-related issues and activities, and for the management to formulate policies and directives to change and/or improve the quality system. This process is defined in Operational Procedure QOP-56-01, Management Review.

6. The President has the overall responsibility for ensuring that all pertinent documents, reports and records are distributed to appropriate departments and functions, and that information and data about quality performance and the effectiveness of the quality system are reported to the top management.

ASSOCIATED DOCUMENTS

Organizational Chart

QOP-56-01 Operational Procedure: Management Review

QOP-62-01 Operational Procedure: Training and Awareness

QOP-42-01 Operational Procedure: Quality System Documentation

From <http://desmoines.deei.com/?page_id=82>

5.6

Tuesday, June 03, 2014 9:30 AM

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ISO9001:2008 Standard

QM 5.6 – Management Review

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Quality Manual	5 – Management Responsibility	
Section 5.6	Section Revision: A	Revision Date: 7/12/2010
5.6 – Management Review		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

The quality system described in this section of the Quality Manual conforms to the requirements of the standard: Element 5.6 ISO 9001:2008 Management Review.

Top management conducts periodical reviews of the quality system. The review evaluates the suitability and effectiveness of the system, identifies opportunities for improvement, and considers the need for changes to the quality policy and quality objectives. Results of the review are documented.

PROCEDURAL POLICIES

1. General

1.1 The purpose of management reviews is to:

Evaluate the suitability, adequacy and effectiveness of the quality system;

Consider changes to the quality management system and to the quality policy and quality objectives; and

Identify opportunities for improvement of the quality system, processes and products.

1.2 Management reviews are chaired by the President and are attended by the executive management team, representing all departments within the company.
Finding-change executive management to top management

1.3 Management reviews are conducted at minimum twice per year. More frequent reviews are scheduled in periods when organizational changes, or other circumstances require increased attention and input from the top management.

2. Review input

2.1 Input into the management reviews consists of information and data related to quality performance of the organization. At a minimum, this includes:

Results of audits,

Customer feedback and complaints,

Process performance and product conformance data,

Status of preventive and corrective actions,

Changes that could affect the quality system,

Follow-up actions from earlier management reviews, and

Recommendations for improvement.

Section 8.4 of this manual, Analysis of Data, and Operational Procedure QOP-56-01, Management Review, define the scope, and method of presentation, of the input information and data.

3. Review output

3.1 Management reviews are concluded with actions related to improvement of the quality management system, and improvement of processes and products to better meet customer requirements. The review also identifies resource needs to implement these actions.

3.2 Results of management reviews are documented in minutes of the review meeting. The minutes include improvement actions, and assign responsibilities and allocate resources for implementation of these actions.

ASSOCIATED DOCUMENTS

QOP-56-01 Operational Procedure: Management Review

From <http://desmoines.deei.com/?page_id=84>

5.6.1

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ISO9001:2008 Standard

QOP-56-01 – Management Review

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QMS Operational Procedure	QOP-56-01	
Section 5.6	Section Revision: B	Revision Date: 2/3/2014
Management Review		
Approved By: Todd Gifford		Date: 7/12/2010

I. PURPOSE

The purpose of this procedure is to provide for a system and instructions, and to assign responsibilities for scheduling, conducting, and recording management reviews of the quality management system.

II. APPLICATION

This procedure applies to all activities comprising the quality system, and in particular those named in ISO 9001:2008 Standard 5.6.2, Review input.

This procedure directly concerns the top executive management.

III. PROCEDURE

1. Frequency and Scheduling

Quality performance and the quality management system are reviewed by the executive management twice per year, at minimum. The President determines the actual date for the review, coordinating with participating managers.

2. Attendance

Attendance required to qualify as a Management Review meeting includes, at a minimum: Three out of the following people: President, CEO/Treasurer, Vice President-Sales, Vice President of Operations, and Chairman of the Board of Directors.

3. Agenda

3.1 The agenda for management review meetings is prepared by the President.

It is distributed to the participating managers at the meeting, or shortly before the meeting. At a minimum, the agenda covers all items listed in Clause 4 of this procedure, Review input.

4. Review input

4.1 At a minimum, following information and data are presented for review:

Action items from last meeting:

Status of action items from previous meeting. Items which are not completed are carried on as continuing actions, and are recorded as such in the minutes of the meeting.

Resources:

Review of adequacy and allocation of resources, including capital equipment needs, staffing levels.

Resource Requirements Review

Measurement Systems Analysis Review (MSA)

5S Systems Review

IT Systems Projects Completed and Future Review

Process performance and product conformance:

Review of quality performance data. These include rates or process and product nonconformities, on-time delivery performance, supplier quality performance, and productivity data.

Internal quality audits:

Review of results of internal quality system audits. This includes summaries of results for the cycle, frequencies of audit findings against particular elements of the quality system, and discussion of particularly important findings.

Corrective and preventive actions:

Review of most important corrective and preventive actions implemented through the period, and the status of pending actions.

Customer feedback and complaints:

Review of customer feedback and complaints, including analysis of trends for particular categories, as defined in Procedure QOP-72-02.

Customer satisfaction:

Review of customer satisfaction data and trends, as defined in Procedure QOP-82-01.

Vendor Performance:

Review of significant vendor quality performance issues.

Training:

Review status of training programs and the effectiveness of training provided. This includes correlation of training with quality and productivity performance trends in corresponding areas.

Continual improvement:

Review of data demonstrating progress toward achieving continual improvement goals, and reviews current and completed improvement projects.

Changes that could affect the quality system:

Review/discussion of any process, capacity, or other operational or organizational changes that affect the quality system; and proposes specific actions to update or modify the system in response to these changing circumstances.

4.2 In addition to the topics listed above, management review may also consider such issues as cost of quality and non-quality; integration of the quality system with other operations and activities; market and customer response to the quality effort; and any other such issues related to the quality management system.

5. Quality policy and quality objectives

5.1 An important role of management reviews is to determine progress toward fulfilling the quality policy and achieving quality objectives.

5.2 Quality objectives established through the review period are systematically evaluated to assess progress. Objectives that have been achieved may either be upgraded to a higher performance level, or be closed out to free resources for improvement in another area.

5.3 When objectives are not achieved on time, the review investigates and determines causes for the failure to achieve the objectives. Depending on the nature of the objective and causes for failure to achieve it, the top management may decide to drop the objective, reduce its scope or level, reassign responsibilities and/or allocate additional resources, or extend the due date for achieving the objective. Any decisions regarding quality objectives are recorded in the minutes of the review.

may decide to drop the objective, reduce its scope or level, reassign responsibilities and/or allocate additional resources, or extend the due date for achieving the objective. Any decisions regarding quality objectives are recorded in the minutes of the review.

5.4 New objectives are established where it is necessary to improve performance or quality system to fulfill the quality policy or other organizational goals or aspirations. New objectives are documented in the minutes of the review.

5.5 The principal quality policy is also reviewed to ensure its continuing relevance. The policy is changed when the goals expressed in the policy have been achieved, or when changes within or outside the company render the policy inadequate or inappropriate.

6. Review output

6.1 Management reviews are concluded with actions related to:

Improvement of the quality management system,

Improvement of quality performance, and

Improvement of products and/or services to better meet customer requirements and increase customer satisfaction.

6.2 These improvement actions are often formulated as quality objectives with specific measurable targets, due dates, assignments of responsibilities, and allocation of resources for their implementation.

6.3 Management review output is documented in the minutes of the review meeting, in QF-56-01. Action items are highlighted or are placed under a special heading to ensure that they are easily identifiable. Whenever applicable, action items include assignment of responsibility, timeframe, and allocation of resources for implementation of the action.

7. Record

7.1 Minutes of management review meetings are prepared by the President in electronic form QF-56-01, and are distributed to the attending and, if any, absent managers. The minutes and other documents associated with the review are confidential. The location and retention period for management review records are specified in Operational Procedure QOP-42-03, Control of Quality Records.

ASSOCIATED DOCUMENTS

QF-56-01-01 Quality Form: Management Review Minutes

QF-56-01-02 Quality Form [Cedar Rapids Location/Shared]: Statistical Data For Management Review

QF-85-01-01 Quality Form: Employee Feedback/Concern Form

QF-72-02-02 Quality Form: Online Customer Feedback/Complaint Form

QF-72-02-01 Quality Form [Cedar Rapids Location]: Call Report Form

QOP-62-01 Operational Procedure: Training and Awareness

QOP-72-02 Operational Procedure: Customer Feedback and Complaints

QOP-82-01 Operational Procedure: Customer Satisfaction

QOP-82-02 Operational Procedure: Internal Quality Audits

QOP-85-01 Operational Procedure: Continual Improvement

QOP-85-02 Operational Procedure: Corrective and Preventive Action

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6.1

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QM 6.1 Provision of Resources

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Quality Manual	6 – Resource Management	
Section 6.1	Section Revision: A	Revision Date: 7/12/2010
6.1 – Provision of Resources		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

Top executive management is committed to provide adequate resources for the implementation and improvement of the quality system, and for addressing customer satisfaction. **Finding - Add Quality Manager**

PROCEDURAL POLICIES

1. General

1.1 Resources required for implementation and improvement of the quality system, and for addressing customer satisfaction, may include people, suppliers, information, infrastructure, work environment, and financial resources.

2. Determination of resource requirements

2.1 The Executive Management Team and personnel involved in the quality system are responsible for determining resource requirements for the implementation and improvement of the system.

2.2 The President and CEO/Treasurer are responsible for determining resource requirements for addressing customer satisfaction. This is based on input from other personnel responsible for activities relevant to particular aspects of customer satisfaction. Operational Procedure QOP-82-01 explains how information about customer satisfaction is collected and analyzed.

2.3 The principal forums for determining and communicating resource requirements are management reviews of the quality system. Operational Procedure QOP-56-01, Management Review, explains the process for Management Review. Customer or Employee Suggestions/Complaints are also sources of determining resource requirements. Reference QOP-72-02 for Customer Feedback, as well as Employee Suggestions input.

3. Provision of resources

3.1 Top executive management has the responsibility and authority for provision of resources. **Finding - Add Quality Manager**

3.2 Allocation of resources for particular activities is integrated with the process of defining and initiating the activity. It may take the form of personnel assignments, allocation of space or equipment, training, procurement decisions, budgets, etc.

3.3 Allocation of resources may be documented in the quality manual, operational procedures, minutes of meetings, memoranda, or any other form. Approvals of resource allocations may be also communicated verbally.

3.4 Management review of the quality system is the principal forum for allocation of resources for the operation and improvement of the system, however, resource allocation is also discussed and reviewed at Office Group Meetings, which include the executive management team. All actions initiated by these reviews are supported by allocation of specific resources necessary for their implementation. Operational Procedure QOP-56-01, Management Review, defines this process.

ASSOCIATED DOCUMENTS

QOP-56-01 Operational Procedure: Management Review

QOP-82-01 Operational Procedure: Customer Satisfaction

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6.3

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QM 6.3 – Infrastructure

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Quality Manual	6 – Resource Management	
Section 6.3	Section Revision: A	Revision Date: 7/12/2010
6.3 – Infrastructure		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

Suitable, facilities, process equipment, supporting services (such as transport, communications, or information systems), and other necessary infrastructure are determined, provided and maintained, as required to achieve conformity to customer requirements.

PROCEDURAL POLICIES

1. Infrastructure and Facilities

1.1 Planning of new, and/or modification of existing infrastructure and facilities is usually conducted in conjunction with process changes; capacity and/or work force expansions; and other such events. Facilities may also be expanded or modified to improve productivity and/or quality, or to improve the work environment.

1.2 Executive Management and Managers/Supervisors are responsible for identifying the need and requirements for new, and/or modification of existing infrastructure and facilities in their departments. Requests for significant changes and/or expansions of facilities are submitted to the top management for review and approval.

2. Supporting services and maintenance of facilities

2.1 Supporting services required by Dee Electronics include transportation, communication, and IT services:

Transportation services are usually purchased from parcel delivery and courier services, and from trucking or other transportation companies or consolidators. Purchasing of these services is managed by Executive Management.

Communication services are provided by various telephone, wireless, and internet access companies. Executive Management is responsible for administrating and coordinating these contracts.

IT systems are designed and implemented by Dee personnel and external consultants, and are operated internally by IT Department. Control of documents and data on the internal network system is governed by operational procedure QOP-42-02, Control of Documents.

2.2 Maintenance of buildings and facilities is performed by external contractors. Repairs of building are contracted as needed. Executive Management is responsible for coordinating and managing maintenance contracts.

3. Process equipment maintenance

3.1 Key process equipment are suitably maintained in accordance with maintenance plans specified by equipment manufacturers or departmental managers responsible for the equipment.

ASSOCIATED DOCUMENTS

QOP-42-02 Operational Procedure: Control of Documents

QOP-56-01 Operational Procedure: Management Review

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6.4

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ISO9001:2008 Standard

QM 6.4 – Work Environment

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Quality Manual	6 – Resource Management	
Section 6.4	Section Revision: B	Revision Date: 2/8/2014
6.4 – Work Environment		
Approved By: Todd Gifford		Date: 7/12/2010

GENERAL POLICY

Dee Electronics provides for its employees a suitable work environment (to include physical, environmental, noise, temperature, lighting, or weather) needed to achieve conformity to product requirements.

PROCEDURAL POLICIES

1. Human factors

1.1 The President, CEO/Treasurer, Vice President of Operations, Vice President of Sales, and departmental managers are responsible for ensuring suitable social and psychological conditions in the workplace. This is to include such aspects as interaction and communication between employees, employee harassment, conflict resolution, and so forth. Relevant workplace policies are implemented mainly through our Employee Manual (issued to every employee), training and awareness programs and, where necessary, disciplinary actions. (Refer to Operational Procedure QOP-62-01, Training and Awareness.)

2. Physical factors

2.1 The President and executive management team are responsible for identifying those operations where extreme environmental conditions could impact quality performance of personnel and result in product nonconformities. Where appropriate,

limits of exposure and/or mitigating measures shall be defined and implemented for these operations.

2.2 From an organization and cleanliness as well as safety standpoint, DEE utilizes the 5S process. **Finding - add after 5s (Industry standard organization, sort, streamline, shine, standardize, sustain)**

3. Health and safety

3.1 Health and safety management system is independent from the quality management system. It is administrated by the President and executive management team. DEE has an Environmental, Health, and Safety Plan document.

ASSOCIATED DOCUMENTS

Operational Procedure QOP-62-01, Training and Awareness

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QOP-74-03

Thursday, June 05, 2014 9:35 AM

QOP-74-03

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Read completed 6/5/14 Blenda Boyles

QOP-74-03 – Verification of Purchased Product

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QMS Operational Procedure QOP-74-03

Section 7.4 Section Revision: A Revision Date: 7/12/2010

Verification of Purchased Product

Approved By: Todd Gifford Date: 7/12/2010

I PURPOSE

The purpose of this procedure is to provide for a system and instructions, and to assign responsibilities for verification of purchased product, and for performing receiving inspections of incoming product.

II APPLICATION

This procedure applies to materials and components that are intended for resale to customers. This procedure concerns Purchasing, Warehouse, and Quality Assurance.

III PROCEDURE

1. Verification methods

1.1 Following methods and approaches are used for verification and acceptance of purchased product:

- *Receiving inspection,*
- *Additional Inspection,*
- *Source inspection,*
- *Supplied evidence of product conformity (this may be in the form of inspection, testing, or process control records, or certificates supplied with the product);*
- *Confidence in supplier's quality system and product verification program (this may be based on supplier's quality system certification, supplier audits, and satisfactory quality performance history).*

1.2 The President, CEO/Treasurer, Vice President of Operations, and Quality Assurance is responsible for selecting appropriate verification and acceptance methods for specific products. The selection is based on:

Criticality and importance of the product;

Availability of product verification records or certificates from the supplier or an independent third party;

Knowledge of, and/or confidence with the supplier's quality management system and product verification program.

1.3 Product verification and acceptance methods to be applied are specified in purchasing documents, Additional Inspection Master Database, procedures, or supplier files. This information is communicated to Receiving prior to the arrival of purchased product.

1.4 Receiving inspection is applied to all purchased components.

1.5 Additional Inspection is applied to components with previous corrective action issues deemed significant, critical components, and shipments of a new parts added to our system. When Additional Inspection is required, the 2 X 1 Dee Incoming Product Label will reflect an "X", as well as this part is noted in our Additional Inspection Required database.

2. Receiving inspection

2.1 Upon unloading of deliveries, receiving clerk counts the number of delivered units, checks marking and identification of packages, and inspects all packages for any signs of tampering or damage. If all these checks and inspections are satisfactory, he or she signs the delivery receipt. If not, any shortages or damages are noted on all copies of the delivery receipts.

2.2 Next, the received packages are moved to the designated receiving area, a copy of the relevant purchase order is retrieved from the pending orders file, and the packing slips (if any) are removed from packages. The goods are counted, their part numbers are verified against the purchase order and the packing slip, and the goods are examined visually for any signs of damage.

2.3 If no other product verification activities are required, the goods are moved to appropriate material putaway staging areas, and then are putaway in designated inventory storage areas.

2.4 If Additional Inspection is required but not done immediately, the goods are segregated in a HOLD Area or on a Cart, requiring additional inspection.

2.5 If a nonconforming product is identified, the receiving person moves the product to a HOLD area, and initiates a nonconformity report in accordance with Procedure QOP-83-01, Control of Nonconforming Product. The product is labeled with a CAR/RMA label, the CAR/RMA number is marked on the sticker. Quality Control Coordinator is notified.

3. Additional Inspection

3.1 As applicable, receiving additional inspection comprises:

Review of packaging/part markings, material certificates, source inspection records, compliance certificates, or other such documentation delivered with the product;

Visual inspection to detect any damage or other visible problems;

Taking measurements and testing as required; and

3.2 When products pass the inspection, they are moved to appropriate putaway staging areas, and then putaway in a designated storage area. Quality records established during the receiving inspection are entered.

3.3 If products fail the additional inspection, a nonconformity report in accordance with Procedure QOP-83-01, Control of Nonconforming Product. The product is moved to a designated HOLD area. Quality Control Coordinator is notified.

4. Source inspection

4.1 Where purchased product verification is to be performed or witnessed at the supplier's location, this should be specified in purchasing documents. This also applies to cases where source inspections are performed or witnessed by customers.

ASSOCIATED DOCUMENTS

QF-74-03-01 Form (DBA Form # PO-C): Receiving Form

QF-74-03-02 Form: Additional Inspection Master Database Form

QOP-74-02 Operational Procedure: Purchasing

QOP-83-01 Operational Procedure: Control of Nonconforming Product

QOP-82-01

Wednesday, June 04, 2014 4:11 PM

Des Moines Quality Management System

ISO9001:2008 Standard

Audit completed 6-3/14 Brenda Boyles

QOP-82-01 – Customer Satisfaction

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QMS Operational Procedure QOP-82-01

Section 8.2 Section Revision: A Revision Date: 7/12/2010

Customer Satisfaction

Approved By: Todd Gifford Date: 7/12/2010

I PURPOSE

The purpose of this procedure is to provide for a system and instructions, and to assign responsibilities for determining and reporting customer satisfaction.

II APPLICATION

This procedure applies to products, delivery, servicing, and other activities bearing on customer satisfaction. This procedure directly concerns Sales, Marketing, and Customer Service.

III PROCEDURE

1. Sources of information

1.1 Information and data on customer satisfaction are acquired form customer feedback and by analyzing customer behavior, to include:

Customer Feedback, compliments, and developmental suggestions,

Dee Team Member Feedback,

Customers' Dee Electronics Performance Reports,

Product returns and rejections,

New Key Customer Growth, and

Existing Customer Sales Growth and Market share.

Customer Surveys.

1.2 The general scope, methods, and program for collecting customer satisfaction data and information are defined in this procedure. However, the program may be periodically adjusted.

2. Customer feedback and complaints

2.1 Customer complaints, spontaneous expressions of satisfaction, and other unsolicited customer feedback are collected and processed by Customer Service/Inside Salespeople, Field Salespeople, and Sales Management. These activities are defined in Operational Procedure QOP-72-02, Customer Feedback and Complaints.

2.2 The resulting data is periodically compiled and analyzed by the President, and is presented and discussed at management review meetings.

3. Customer Performance Reports, Recognition/Awards

3.1 Dee Electronics encourages customers to rate its performance, and seeks to participate in customer's award and recognition programs. As such recognitions and ratings are a direct expression of customer satisfaction or dissatisfaction, they are considered as one of the most important inputs into determining customer satisfaction. Dee Electronics can also

produce delivery performance data by customer, in absence of the customer providing it to Dee. This is used if customer does not provide Dee with performance data.

3.3 Awards and recognitions, as well as failures to achieve them, are used in determining customer satisfaction. Executive Management analyses which aspects of products and/or services are most responsible for achievement of the recognition, and determines how this should be used in determining overall customer satisfaction for these aspects. The results are presented at management reviews. Customer ratings are analyzed and used in the same way as other customer feedback, in accordance with Clause 2 of this procedure and Operational Procedure QOP-72-02, Customer Feedback and Complaints.

4. Product returns and rejections

4.1 Customer Service/Inside Sales handles product return authorization requests. The reason for each return request or claim is recorded in our CAR/RMA (Corrective Action/Return Material Authorization) Form.

4.2 Product return CAR/RMA records are periodically compiled and analyzed at the management review meetings.

5. New Key Customer Growth

5.1 Sales records are periodically analyzed to identify trending of new key customers. The trending of these new customers sales is one of the most important indicators of new key customer satisfaction.

5.2 Statistics on new key customers trends are presented and discussed at management reviews.

7. Existing Customer Market share

7.1 Sales Management is responsible for collecting and analyzing data regarding existing customer market share. This data is periodically analyzed and presented at management review meetings.

8. Customer Surveys

8.1 Surveys, when and where appropriate at the discretion of the President, are selectively done to gain additional feedback from clients. These can range from 1 question to ten questions typically.

9. Analysis and presentation of results

9.1 Sales Management assembles, and analyses all customer satisfaction data collected form various sources and pertaining to different aspects of company's products and services, and presents this information at Managment Review meetings.

9.2. Executive Managers participating in the meeting discuss the reasons for successes or failures in reaching customer satisfaction objectives, and provide input for setting new objectives for the coming year.

ASSOCIATED DOCUMENTS

QOP-56-01 Operational Procedure: Management Review

QOP-72-02 Operational Procedure: Customer Feedback and Complaints

QOP-82-02

Wednesday, June 04, 2014 4:11 PM

Des Moines Quality Management System

ISO9001:2008 Standard

Audit 6/3/14 completed Brenda Boyer

QOP-82-02 – Internal Audits

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QMS Operational Procedure QOP-82-02

Section 8.2 Section Revision: C Revision Date: 5/20/2014

Internal Quality Audits

Approved By: Todd Gifford Date: 7/12/2010

I PURPOSE

The purpose of this procedure is to provide for a system and instructions, and to assign responsibilities for conducting internal quality audits.

II APPLICATION

This procedure applies to all activities comprising the quality system. This procedure directly concerns Quality Assurance and the executive management, and is indirectly relevant to all departments.

III PROCEDURE

1. Internal quality audit plan

1.1 The President is responsible for planning and scheduling internal quality audits. Each section is audited at least once a year. In addition to the annually scheduled audits, certain

sections may be selected for more frequent auditing, depending on their status, importance, and past compliance history.

1.2 The President schedules dates and assigns audit teams for all auditable sections.

1.3 The **internal audit plan** is synchronized with management reviews of the quality system (refer to Procedure QOP-56-01, Management Review), so that results of an auditing cycle are available for the management review meeting.

2. Audit team

2.1 Personnel assigned to carry out internal audits are independent of those having direct responsibility for the audited activity. If there is no conflict of interest, it is usually Quality Assurance that conducts the audits. Activities that are the responsibility of Quality Assurance are usually audited by trained IQA individuals from other departments.

2.2 Internal auditors are trained by **in-house IQA-certified Trainers or professional IQA Trainers**. Quality Assurance maintains a copy of the ISO9001:2008 standard on the company Intranet. **IQA Training, whether done in-house or by professionals,** is recorded in the Training Records.

3. Preparing for audit

3.1 Auditors prepare for an audit by familiarizing themselves with the ISO 9001 standard, refreshing their knowledge of the quality manual and relevant operational procedures, reviewing corrective actions files, and reviewing the IQA checklist.

4. Conducting and reporting the audit

While conducting the audit, auditors seek objective evidence demonstrating whether the audited activities conform with the requirements of the documented quality system, and whether the system is effectively implemented and maintained. When a nonconformity is noted, it is brought to the attention of, and discussed with, the President. Before the end of an audit each noted nonconformity is documented using the Internal Audit/Management Corrective Action and Preventive Action Form QF-82-02-01. Auditors fill out only part of the form, describing the noted nonconformity. The form is then handed over to the President who uses the rest of the from to propose a corrective action and follow through to close out the corrective action.

5. Corrective action and follow up

5.1 Once a nonconformity is identified and documented, further processing of the nonconformity report is similar to the corrective action requests (Procedure QOP-85-02, Corrective and Preventive Action). Upon receiving the report, the President and appropriate managers investigate the cause of the problem noted as a nonconformity, proposes a corrective action to be taken, and indicates the date by which the corrective action will be fully implemented.

5.2 When there is objective evidence that the corrective action is implemented and effective, the nonconformity report is closed out. If more work is needed to fully implement the action, a new follow-up date is set.

6. Documentation and record

6.1 Internal audits and implementation of resulting corrective actions are documented using Internal Audit Checklist Form QF-82-02-02 for documenting the Audits, and the Internal Audit/Management Corrective and Preventive Action Form QF-82-02-01 for documenting findings that require Corrective Action.

6.2 The Internal Audit Checklist Form QF-82-02-02 contains the results and documentation of the Audit. The Internal Audit/Management Corrective and Preventive Action Form QF-82-02-01 contains a description of any nonconforming condition found during the Audit, the proposal for a corrective action, and corrective action implementation information.

6.3 At the end of an auditing cycle, all nonconformity reports established during the cycle are compiled and analyzed, and are presented at the management review meeting.

ASSOCIATED DOCUMENTS

QF-82-02-02 Quality Form: Internal Quality Audit Checklist Form and Archived IQA Records

QF-82-02-01 Quality Form [Cedar Rapids Location]: Internal Audit/Management Corrective and Preventive Action Form

QF-82-02-03 Quality Form (Shared / Cedar Rapids and Des Moines): Internal Audit Plan

Operational Procedure QOP-85-02: Corrective and Preventive Actions

QOP-82-04

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Des Moines Quality Management System

ISO9001:2008 Standard

Audit completed 6/3/14 Brenda Boyd

QOP-82-04 – In-Process Inspections

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QMS Operational Procedure QOP-82-04

Section 8.2 Section Revision: A Revision Date: 7/12/2010

In-Process Inspections

Approved By: Todd Gifford Date: 7/12/2010

I PURPOSE

The purpose of this procedure is to provide for a system and instructions, and to assign responsibilities for performing and recording in-process inspections.

II APPLICATION

This procedure applies to products throughout the order fulfillment cycle. This procedure concerns Picking and Quality Assurance.

III PROCEDURE

1. Scope and responsibilities

In-process inspections include operator self-inspections throughout the production process. Also, additional in process verifications are performed as required by the Work Instructions.

2. First-Time-Buy Part and Production Assembly inspection

2.1 When buying a part for the first time, Quality Assurance performs a second visual inspection in addition to the verification of purchased parts process.

2.2 First-time-buy part additional inspections are called out on the 2 x 1 Incoming Bar-code label that Receiving puts on every product that is received.

2.3 First-time-buy parts are subjected to the additional inspection by Receiving, and may include QA and Product Management When the result of the inspection is satisfactory, the inspector signs off the inspection record in the system (QF-74-03-02 Additional Inspection database form). The sign-off constitutes the record of the additional inspection, identifies the inspector, identifies the inspection status of the product, and authorizes the part to move to the next process.

2.4 Quality Assurance and/or Operations may subject First-Time-Builds to additional inspection. If conforming, sign off is documented in the audit database. The sign-off documents the record of additional inspection, identifies the inspector, and the inspection status, and releases the product to the next process.

3. Picking Process

- Personnel picking parts verify each item associated to the work instructions is correct as picked.
- Personnel also visually inspect parts as they are picked as appropriate and feasible.

4. All in-process inspections required during the assembly process are noted in the assembly work instructions. Appropriate records of assembly in-process inspections are kept.

5. Quality Check Process

As product is moved throughout the production process any in-process quality inspection is verified as required by the work instructions. Any required in-process check is then documented / recorded and stored per production order.

Quality Audit is a Final Inspection process that is performed based upon the documented requirements in the Work Instructions.

6. Release of product

Completed product is routed to the Quality Assurance queuing area where the Quality Assurance inspector verifies the product is conforming to the work instructions and requirements. If conforming, the product is released to ship and documented electronically.

Quality Coordinator signs off on QMS product before packaged for shipping

7. Nonconforming product

Hold areas in place

If a product is found to be non-conforming, Quality Assurance is notified and moves the product to a HOLD area.

ASSOCIATED DOCUMENTS

QF-82-04-01 Quality Form *(DBA Form # WO-D):* Picking Form

QF-82-04-03 Quality Form: Instruction/Inspection Log Form

QF-82-05-02 Quality Form: Quality Assurance Audit Form

QOP-82-05 Operational Procedure: Final Inspection

QOP-74-03 Operational Procedure: Verification of Purchased product

QOP-83-01 Operational Procedure: Control of Nonconforming Product

QOP-82-05

Wednesday, June 04, 2014 4:12 PM

Des Moines Quality Management System

ISO9001:2008 Standard

QOP-82-05 – Final Inspection

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QMS Operational Procedure QOP-82-05

Section 8.2 Section Revision: A Revision Date: 7/12/2010

Final Inspection

Approved By: Todd Gifford Date: 7/12/2010

I PURPOSE

The purpose of this procedure is to provide for a system and instructions, and to assign responsibilities for performing the final inspection.

II APPLICATION

This procedure applies to all products being shipped to customers. This procedure concerns Shipping and Quality Assurance departments.

III PROCEDURE

1. General

All finished products/orders are subjected to final authorization before they released to ship. Quality Assurance and/or Management is responsible for the final inspection and authorization.

http://desmoines.deei.com/?page_id=162 6/3/2014

QOP-82-04 Operational Procedure: In-process Inspections

QOP-74-03 Operational Procedure: Verification of Purchased Product

QOP-83-01 Operational Procedure: Control of Nonconforming Product

QM8.1

Thursday, June 05, 2014 9:59 AM

QM8.1

Des Moines Quality Management System

ISO9001:2008 Standard

QM 8.1 – Planning for Monitoring and Measurement

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Quality Manual 8 – Measurement, Analysis, and Improvement

Section 8.1 Section Revision: B Revision Date: 2/3/2014

8.1 – General / Planning for Monitoring and Measurement

Approved By: Todd Gifford Date: 7/12/2010

GENERAL POLICY

Measurement and monitoring activities required to assure conformity to product requirements, ensure conformity to the quality management system, and to continually improve the effectiveness of the quality management system are planned and defined. When applicable, statistical techniques are used for analyzing measurement data in addition to exception reporting and other types of reporting.

PROCEDURAL POLICIES

1. Planning

1.1 Measurement and monitoring activities to assure conformity of the Quality Management System are defined in this manual in Section 8.2, Measurement and Monitoring, and in several operational procedures referenced at the end of this section.

1.2 The effectiveness of the quality system is monitored by internal audits and by measuring quality performance and customer satisfaction. Results of these activities are reported to the top management and are used to identify opportunities for improvement. Activities related to internal audits and to measuring customer satisfaction and quality performance are further defined in this manual in Sections 8.2.

2. Statistical techniques

Dee Electronics identifies the need for statistical techniques necessary for establishing, controlling and verifying process capability and product characteristics. Dee Electronics establishes and maintains documented procedures to implement and control the application of identified statistical techniques.

1. Dee Electronics gathers the following data from Corrective Action, Preventative Action, **and Measurement Systems Analysis (MSA):**
    1. Internal and external audit results.
    2. Customer Feedback.
    3. Team member Feedback.
    4. Corrective and preventive actions. - Documented @ Mfg R drive - RMA Log
    5. Quality performance of subcontractors.
    6. Surveys.
    7. Supplier Quality/Performance Measurement Reports provided by Customers.
    8. Dee Performance Reporting on key customer satisfaction metrics as developed internally based on our data.
    9. Customer Sales Growth/Decline Reporting - N/A
    10. **Statistical studies (e.g. Gage R&R) are conducted where feasible to analyze the variation present in the results of each active category of measuring and test equipment.**
2. Data is compiled and analyzed for trends that might merit preventive action. Analysis includes, but is not limited to: Analysis of Root Cause Category Statistics and Trends, Customer Complaint Corrective Actions, Statistical analysis of Supplier Corrective Actions and causes, and Employee and Supplier complaints.
3. The President, CEO/Treasurer, Vice President of Sales and Vice President of Operations select data analysis methods and provide training in the use of specific analytical methods as necessary.
4. Analyses are presented in Management Review Meetings where the usefulness of the data and the appropriateness of the methods used are evaluated.

Pull list completed when required W/O is taken documented on W/O

Gage R/R been completed

ASSOCIATED DOCUMENTS

QF-81-01-01 Measurement Systems Analysis Log

QOP-82-01 Operational Procedure: Customer Satisfaction

QOP-82-02 Operational Procedure: Internal Audit

QOP-82-04 Operational Procedure: In-process Inspections

QOP-82-05 Operational Procedure: Final Inspection

QOP-74-03 Operational Procedure: Verification of Purchased Product

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Des Moines Quality Management System

ISO9001:2008 Standard

Audit completed 6/3/14

QM 8.3 – Control of Nonconforming Product

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Quality Manual 8 – Measurement, Analysis, and Improvement

Section 8.3 Section Revision: A Revision Date: 7/12/2010

8.3 – Control of Nonconforming Product

Approved By: Todd Gifford Date: 7/12/2010

GENERAL POLICY

Nonconforming product is identified, documented, evaluated, and prevented from being used or shipped. Appropriate actions are taken when product nonconformity is identified after delivery. When appropriate, corrective and preventive actions are implemented to prevent recurrence of identified nonconformities.

The quality system described in this section of the Quality Manual conforms to the requirements of the ISO 9001:2008 standard: Element 8.3 – Control of Nonconforming Product.

1. RESPONSIBILITY AND AUTHORITY (R&A)

The R&A for carrying out quality system activities related to this element have been assigned to the President. All associates have the responsibility to carry out their work assignments in accordance with the quality policy and quality system documentation. The

associates have been granted appropriate authority to complete the activities assigned in order to meet specified requirements.

2. CONTROL OF NONCONFORMING PRODUCT

Dee Electronics has established and maintains documented procedures to ensure that nonconforming product is prevented from unintended use or installation. This control provides for identification, documentation, evaluation, segregation, disposition of nonconforming product, and notification to the functions concerned.

2.1 Review and Disposition of Nonconforming Product – Dee Electronics has defined the responsibility for review and authority for the disposition of nonconforming product. Nonconforming product is reviewed in accordance with documented procedures. Where applicable, it may be reworked to meet the specified requirements, accepted without repair by concession, rejected/returned, or scrapped. Dee Electronics does not do Repair. When nonconforming product is corrected, it is subject to re-verification to demonstrate conformity to the requirements. Records of the nonconformities and actions taken, including concessions obtained, are maintained per 4.2.4.

2.2 Where required by contract, the proposed use of product which does not conform to specified requirements is reported for concession to the customer or customer's representative. The description of the nonconformity that has been accepted is recorded to denote the actual condition. Reworked product is reinspected in accordance with documented procedures.

3. PRODUCT RETURNS

3.1 When product nonconformity is detected by the customer after delivery or use has started, the customer is instructed to return the product, and a Return Authorization/Corrective Action (RMA/CAR) is issued by Inside Sales (Customer Service).

3.2 When product nonconformity is detected internally after delivery or use has started, customers are informed and instructed what to do with the product via RMA/CAR.

ASSOCIATED DOCUMENTS

QOP-83-01 Operational Procedure: Control of Nonconforming Product

QOP-74-03 Operational Procedure: Verification of Purchased Product

QOP-82-04 Operational Procedure: In-process Inspections

QOP-82-05 Operational Procedure: Final Inspection

Des Moines Quality Management System

ISO9001:2008 Standard

6/4/14 completed by Brenda Boyles

QOP-83-01 – Control of Nonconforming Product

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QMS Operational Procedure QOP-83-01

Section 8.3 Section Revision: A Revision Date: 7/12/2010

Control of Nonconforming Product

Approved By: Todd Gifford Date: 7/12/2010

I PURPOSE

The intent of this procedure is to describe the process at Dee Electronics for the Control of Nonconforming Product (Section 8.3 of ISO 9001:2008).

The overall Responsibility and Authority for activities related to this element of the standard have been assigned to the President. Team members are charged with the responsibility to implement the procedure as written, and have been granted appropriate freedom and authority to do so.

II APPLICATION

This procedure pertains to actions taken when product fails to pass any inspection and/or test.

III PROCEDURE

1. Upon receipt, if products are nonconforming (damaged, part number wrong, count wrong, etc.), Purchasing, Quality Assurance Coordinator, and Sales, when appropriate, are notified. The Quality Control Coordinator or Receiving Personnel records the nonconformance if nonconformance is traceable to supplier error. Product is labeled with Non-Conforming label and then moved to a HOLD AREA.
2. If product is found to be nonconforming after being received, it is labeled with Non-Conforming label, and then moved to a HOLD AREA to await disposition. Corrective Action Report (CAR)/RMA document identification is noted on labeling when the document record has been created.
3. The Quality Control Coordinator determines the disposition of nonconforming product (disposition may also be delegated to the Warehouse Supervisor).
4. Disposition alternatives include:
    1. Shipping to customer after receiving customer concession,
    2. Returning to supplier,
    3. Stocking in inventory for future sale,
    4. Scrapping
5. When customers accept the order by concession without repair, Sales records the acceptance on the original order in the ECIS database. Details of the concession include identification of the customer representative, the date of the concession and a description of the order as accepted. The record of concession without repair is a retained quality record. See Procedure QOP-42-03, Control of Quality Records, for retention details.
6. Returned goods are given an RMA # approval by Quality Control Coordinator or Purchasing and recorded in the ECIS database. Quality Control Coordinator dispositions customer-returned goods as stated above in paragraph 4.
7. Product nonconformances are investigated for root causes, analyzed for trends, and discussed in Management Review.
8. Nonconforming orders (e.g., improper scanning, inappropriate product numbers, or inaccurate counts) are refilled, recounted, and rescanned by warehouse personnel.
9. PRODUCT RETURNS: If a product nonconformity is detected by the customer after delivery or use has started, the customer is instructed to return the product, and a Return Authorization/Corrective Action (RMA/CAR) is issued by Inside Sales (Customer Service), approved by Quality Control Coordinator.
10. When product nonconformity is detected internally after delivery or use has started, customers are informed and instructed what to do with the product via RMA/CAR.

ASSOCIATED DOCUMENTS

QF-85-02-01 Quality Form: Corrective Action Report CAR/RMA Form

QOP-74-03 Operational Procedure: Verification of Purchased Product

QOP-82-04 Operational Procedure: In-process Inspections

QOP-82-05 Operational Procedure: Final Inspection

QOP-85-02 Operational Procedure: Corrective and Preventive Action

8.4

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Des Moines Quality Management System

ISO9001:2008 Standard

6/13/14 completed by Board Boyle

QM 8.4 – Analysis of Data

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Quality Manual 8 – Measurement, Analysis, and Improvement

Section 8.4 Section Revision: A Revision Date: 7/12/2010

8.4 – Analysis of Data

Approved By: Todd Gifford Date: 7/12/2010

GENERAL POLICY

Dee Electronics collects, compiles and analyzes information and data required for evaluating the suitability and effectiveness of the quality system and for identifying opportunities for continual improvement.

PROCEDURAL POLICIES

1. General

1.1 Data and information recorded in quality records are compiled and analyzed periodically to determine trends in the performance and effectiveness of the quality system and to identify opportunities for improvement.

1.2 The President is responsible for coordinating these activities, and for reporting conclusions and trends to the executive management team. This is usually done within the framework of management reviews of the quality system, in accordance with Operational Procedure QOP-56-01, Management Review.

2. Scope

Following categories of information and data are recorded, compiled and analyzed:

2.1 Conformity to product and customer requirements:

On-time delivery performance – recorded in delivery performance reports

2.2 Suppliers:

Supplier quality performance – recorded in subcontractor/vendor quality performance files (Procedure QOP-74-01)

2.3 Customers:

Customer satisfaction levels – recorded in Management Review minutes (Procedure QOP-82-01) and evaluated for trends by executive management.

Customer complaints – recorded in Internal Audit/Management Corrective and Preventive Action Form (Form QF-82-02-01) and evaluated for trends by executive management.

2.4 Quality System:

Effectiveness of training – recorded in training evaluation reports (Procedure QOP-62-01) and evaluated for trends by executive management.

Effectiveness of quality system – recorded in internal audit reports (Procedure QOP-82-02) and evaluated for trends by executive management.

Read 1/3/14 minutes

ASSOCIATED DOCUMENTS

QOP-56-01 Operational Procedure: Management Review

QOP-85-01 Operational Procedure: Continual Improvement

QM8.5

Thursday, June 05, 2014 9:59 AM

QM8.5

Des Moines Quality Management System

ISO9001:2008 Standard

Audit completed 6/3/14 by Brenda Boyles

QM 8.5 – Improvement

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Quality Manual 8 – Measurement, Analysis, and Improvement

Section 8.5 Section Revision: A Revision Date: 7/12/2010

8.5 – Improvement

Approved By: Todd Gifford Date: 7/12/2010

GENERAL POLICY

Dee Electronics deploys a continual improvement philosophy throughout the entire organization. The improvement effort is driven by goals defined in the quality policy and quality objectives. Improvement opportunities are identified by analyzing quality performance data and information. Improvement projects are defined and implemented through the system of corrective and preventive actions and management review actions.

Causes of identified nonconformities are investigated and, where appropriate, corrective actions are implemented to ensure that nonconformities do not recur. Preventive actions are implemented to eliminate the causes of potential nonconformities. Corrective and preventive actions taken are recorded and are followed up to ensure that they have been properly implemented and that they are effective.

PROCEDURAL POLICIES

1. CONTINUAL IMPROVEMENT

1.1 Opportunities for improvement

1.1.1 Opportunities and priorities for improvement are identified by comparing present quality performance to objectives defined in the quality policy and quality objectives.

1.1.2 Quality performance is determined by analyzing information about customer satisfaction, records of product and process nonconformity, results of internal audits, and other data and information relevant to quality performance. Section 8.4, Analysis of Data, defines the scope and system for collecting and analyzing such information.

1.1.3 Quality performance is evaluated by management reviews of the quality system. Where quality performance falls short of a defined objective, the management review identifies specific improvement actions to reach the objective. When a quality objective is reached, the management review may set a new, higher objective in this area and specify new improvement actions for reaching it.

1.1.4 This process of facilitating continual improvement through the use of quality policy, objectives, and analysis of data, is defined in Operational Procedures QOP-85-01, Continual Improvement, and QOP-56-01, Management Review.

1.1.5 In addition to management reviews, departmental supervisors/managers identify improvement opportunities continually, based on daily feedback from their operations and other activities. Employees are also encouraged to come forward with ideas for improving products, processes, systems, productivity, and working environment. These improvement opportunities are evaluated and prioritized by the President and, where appropriate, are implemented through the system of corrective and preventive actions.

1.2 Implementation of improvement projects

1.2.1 Improvement projects are usually implemented through management review actions and through corrective and preventive actions. Where appropriate, improvement projects may be also initiated by management directives, such as policy statements, announcements, memoranda, and so forth.

2. CORRECTIVE AND PREVENTIVE ACTION

2.1 Preventive versus corrective action

2.1.1 Preventive actions are requested and implemented when there are trends of decreasing quality capability and/or effectiveness of the quality system that create a risk for a potential nonconformity. Corrective actions are used when an actual nonconformity is identified.

2.1.2 Recognizing this difference, Dee Electronics has separate systems for identifying the need for corrective and preventive actions. However, once the need is identified, a common system is used to process both types of actions. Forms, logs and other documents and records for processing of corrective and preventive actions are the same.

2.2 Corrective actions

2.2.1 The need for corrective action is determined on the basis of identified actual nonconformities. Corrective action requests are typically triggered by such events as a failed inspection, customer complaint and/or product return, nonconforming delivery from a supplier, or a quality system audit finding.

2.3 Preventive actions

2.3.1 The need for preventive action is determined on the basis of information and data regarding capability and performance of processes, product nonconformity rates, post-order fulfillment experience feedback, customer complaints, quality system audit findings, and management review ideas. Such information and data are collected and analyzed to detect unfavorable trends that, if not checked, will increase the risk of nonconformities. The system for collecting and analyzing quality performance information and data is defined in Section 8.4 of this manual.

2.4 Processing of corrective and preventive actions

2.4.1 Preventive and corrective actions are initiated, processed and followed up using a CAR (Corrective Action Request)/RMA form (QF-85-02-01) or Internal Audit/Management Corrective/Preventive Action Form (QF-82-02-01). The forms document the unsatisfactory condition and the corrective or preventive action to be taken, and is used to record the verification and closure of the action. Open CARs are reviewed regularly to ensure that the actions are implemented and followed up in a timely manner. Procedure QOP-85-02, Corrective and Preventive Action, explains how to use the CAR system.

Quality Coordinator reviews Dee Elec CAR's open on weekly basis

2.5 Continual improvement

2.5.1 Continual improvement actions are often defined as corrective and preventive actions. This is especially true for preventive actions. Operational Procedures QOP-85-01, Continual Improvement, and QOP-56-01, Management Review, explain how the corrective and preventive action system is used for facilitating continual improvement.

2.6 Effectiveness of Corrective Action and Preventative Action

2.6.1 The effectiveness of Corrective Action and Preventative Action taken is reviewed and records of this are maintained in QF-85-02-01 and Management Review Meeting Minutes.

ASSOCIATED SECTIONS AND DOCUMENTS

QF-85-02-01 Form: Corrective Action Report CAR/RMA Form

QF-82-02-01 Form [Cedar Rapids Location/Shared between CR and DM]: Internal Audit/Management Corrective/Preventive Action Form

QOP-85-01 Operational Procedure: Continual Improvement

QOP-85-02 Operational Procedure: Corrective and Preventive Action

QOP-56-01 Operational Procedure: Management Review

QOP-85-01

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QOP-85-01

Des Moines Quality Management System

ISO9001:2008 Standard

completed 6/5/14 Brenda Boyle

QOP-85-01 – Continual Improvement

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QMS Operational Procedure QOP-85-01

Section 8.5 Section Revision: A Revision Date: 7/12/2010

Continual Improvement

Approved By: Todd Gifford Date: 7/12/2010

I PURPOSE

The purpose of this procedure is to provide for a system and instructions, and to assign responsibilities for facilitating continual improvement of the quality management system.

II APPLICATION

This procedure applies to all activities comprising the quality management system. This procedure concerns all departments.

III PROCEDURE

1. General

1.1 Dee Electronics deploys continual improvement philosophy throughout the entire organization. The quality system itself is designed to incorporate all elements necessary to identify opportunities for improvement and to implement improvement projects.

1.2 Everyone in the organization is encouraged to come forward with ideas for improving products, processes, systems, productivity, and working environment. Improvement suggestions are evaluated and prioritized by the executive management team.

2. Identification of improvement opportunities

2.1 Opportunities for improvement are identified form such sources as:

Data of process and product characteristics and their trends;

Records of product nonconformities;

Customer satisfaction, dissatisfaction and other customer feedback;

Market research and analysis of competitive services;

Feedback from employees, suppliers, manufacturer representatives and other interested parties; and

Internal and external audits of the quality system.

2.2 In addition to the above-listed systems for continual performance monitoring, special assessment projects may be initiated to identify opportunities for improvement in other areas. Examples are:

Non value-added use of floor space,

Waste of labor and materials,

Excessive cost of non-quality, and

Excessive handling and storage.

2.3 Opportunities for improvement of operations and systems are identified on two levels: continuously, by the management team and supervisors, based on daily feedback form operations and other activities; and periodically, by the management review, based on analysis of loner-term data and trends. Opportunities for improvement of services are identified mainly by Sales/Marketing Management.

3. Evaluation of improvement opportunities

3.1 Those opportunities for improvement based on daily feedback from operations are evaluated by executive management and, when appropriate, are implemented through the system of corrective and preventive action. Typically, they would be triggered by such events as identification of a nonconforming process or product, customer complaint, internal audit finding, and other such specific events.

3.2 Opportunities of improvement based on longer-term data and trends are evaluated by the management review. They are prioritized with respect to their relevance for reaching the quality policy and quality objectives. When new important opportunities for improvement are not adequately supported by the current policy and objectives, the management review may change the policy and/or establish new quality objectives. This evaluation and prioritizing process is defined in Operational Procedure QOP-56-01, Management Review.

3.3 Opportunities for improvement of services are evaluated by the President and Vice President, Sales.

4. Implementation of improvement projects

4.1 Improvements required to address daily feedback from operations and other activities are usually implemented through corrective and preventive actions. Operational Procedure QOP-85-02, Corrective and Preventive Action, defines the process.

4.2 Longer-term improvement projects to fulfill the quality policy, attain quality objectives, or correct unfavorable trends are implemented through special management actions defined by the management review. These actions may be documented in management review minutes, or be issued as directives, memoranda, policy statements, etc. The corrective and preventive action system may also be used for this purpose.

4.3 Service improvement projects are usually implemented via projects guided by the President.

ASSOCIATED DOCUMENTS

QF-85-01-01 Quality Form: Employee Idea, Feedback, Concern Form

QOP-56-01 Operational Procedure: Management Review

QOP-85-02 Operational Procedure: Corrective and Preventive Action

QOP-85-02

Thursday, June 05, 2014 9:29 AM

QOP-85-02

Des Moines Quality Management System

ISO9001:2008 Standard

Read/Completed 6/5/14 Glenda Boge

QOP-85-02 – Corrective and Preventive Action

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QMS Operational Procedure QOP-85-02

Section 8.5 Section Revision: A Revision Date: 7/12/2010

Corrective and Preventive Action

Approved By: Todd Gifford Date: 7/12/2010

PURPOSE

The intent of this procedure is to describe the process at Dee Electronics for Corrective and Preventive Action (Section 8.5.2 and 8.5.3 of ISO 9001:2008).

The overall Responsibility and Authority for activities relating to this element of the standard have been assigned to the President. Team Members are charged with the responsibility to implement the procedure as written, and have been granted appropriate freedom and authority to do so.

APPLICATION

This process pertains to all aspects of the quality system at Dee Electronic; it is not restricted to product-related concerns or nonconformities. Process and system nonconformities are also provided for.

PROCEDURE

1. The Corrective Action database of ECIS is utilized by team members universally to collect information for improving the effectiveness of the Quality System, such as:
    1. Customer concerns
    2. Inspection and testing results and trends
    3. Internal audit Nonconformances
    4. External audit Nonconformances
    5. Team member concerns
2. Preventive Actions may be taken by management as a result of successful Corrective Action. When Corrective Action is applied to other Dee Electronics products, processes or locations, it is preventive action. Additional sources for Preventive Action include:
    1. Team member concerns
    2. Management Review ideas
    3. Industry and non-industry Best Practices
    4. Internal and external audit Observations
3. If there is observable evidence that the problem already exists (Corrective Action called for):
    1. Team Members in the affected area devise a Corrective Action Plan.
    2. Team Members are trained as appropriate.
    3. Team Members implement Corrective Action Plan. Utiliztion of the following tools is conducted when determining root cause: 5 Why's and Cause/Effect (Fish Bone) Diagrams.
    4. Quality Control Coordinator and President follow up and determine the effectiveness of the CA.
    5. President revises documentation as necessary, maintains records and reports to management in Management Review.
4. If there is no observable problem but there is a potential that one may exist in the near future (Preventive Action called for):
    1. President and affected Team Members brainstorm preventative solution(s).
    2. President proposes Preventive Action in Management Review moves ahead with implementation as appropriate.
    3. Quality practices, documented procedures, processes and forms are revised as needed.
    4. President revises and reissues quality system documentation, as necessary.
    5. Management provides necessary resources.
    6. Team Members are trained as appropriate.
    7. Team Members implement Preventive Action.
    8. President determines effectiveness of Preventive Action and reports during Management Review or prior if appropriate.

9. President maintains records of Preventive Action in Internal Audit/Management Corrective/Preventive Action Form QF-82-02-01.

5. Corrective and Preventive Actions are continuously assessed by:
    1. Internal quality audits.
    2. External quality audits.
    3. Feedback from Team Members.
    4. Feedback from Customers.
6. The President and MR maintain electronic records (ECIS) related to Corrective and Preventive Action. See QOP-42-03, Control of Records, for retention details.
7. Continual Improvement – Continual improvement actions are often defined as corrective and preventive actions. This is especially true for preventive actions. Operational Procedure QOP-85-01, Continual Improvement, and QOP-56-01, Management Review, explain how the corrective and preventive action system is used for facilitating continual improvement.
8. The effectiveness of Corrective Action and Preventative Action taken is reviewed by ongoing statistical analysis (prompting for review of effectiveness of Corrective Actions and Preventative Actions) as well as reviewed in Management Review Meetings by reviewing Corrective Action and Preventative Action trending. Records of these reviews are maintained in QF-85-02-01 and in the Management Review Meeting minutes.

ASSOCIATED DOCUMENTS

Read Jan '14 minutes

QF-56-01-01 Quality Form: Management Review Minutes

QF-85-01-01 Quality Form: Online Employee Feedback/Concern Form

QF-72-02-02 Quality Form: Online Customer Concern/Complaint/Feedback Form

QF-85-02-01 Quality Form: Corrective Action CAR/RMA Form ✓

QF-82-02-01 Quality Form: Internal Audit/Management Corrective/Preventive Action Form

QOP-83-01 Operational Procedure: Control of Nonconforming Product ✓

QOP-72-02 Operational Procedure: Customer Feedback and Complaints

QOP-85-01 Operational Procedure: Continual Improvement